

AGENDA ITEM 15: HEALTHCARE WORKFORCE IN RURAL AREAS

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Purpose of Today's Presentation

- A Family Medicine Resident's Perspective
- Healthcare Workforce Shortages: More Severe in Rural Areas
- Discussion and Next Steps

Family Medicine Physician Training

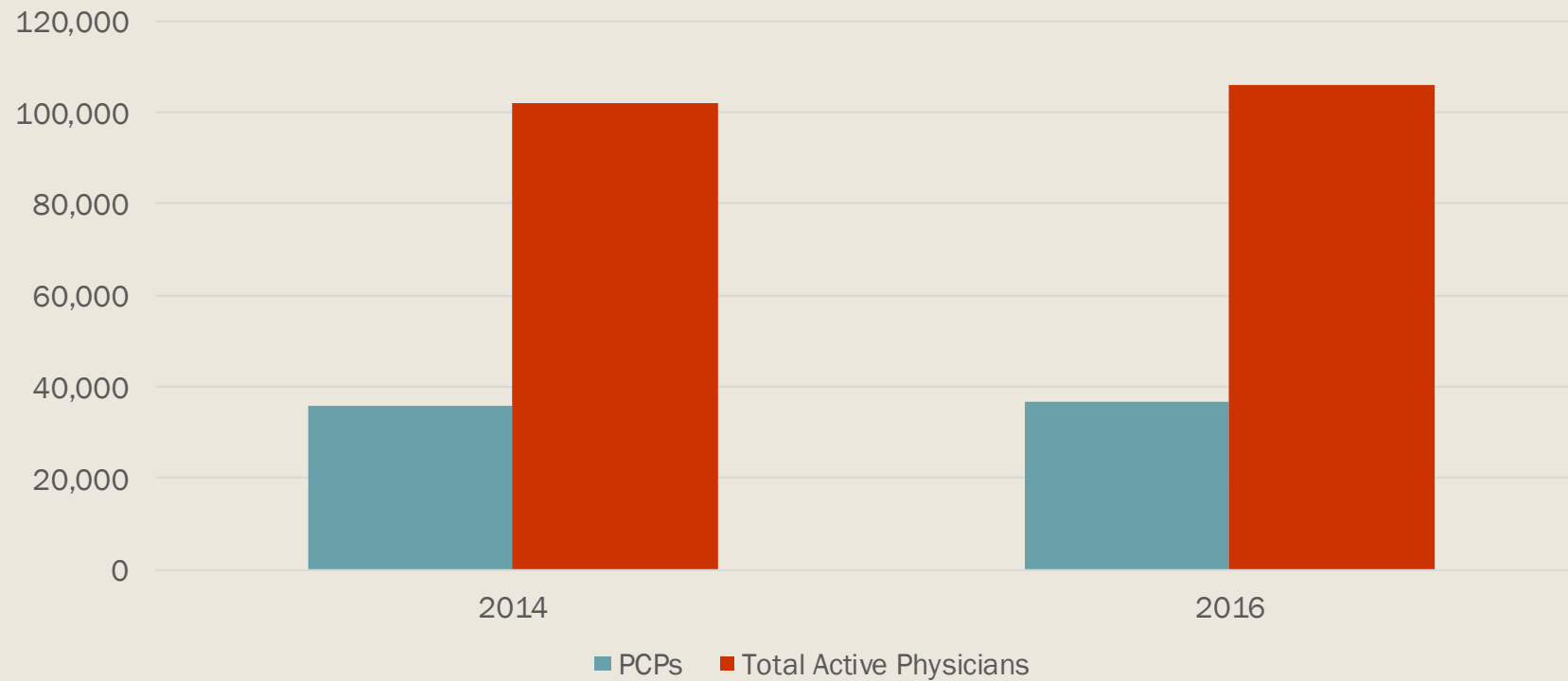
- Continuity of Care Begins with Primary Care
 - Integrating patient care across all settings including home, long-term care facilities, the Clinic, specialty care facilities and inpatient care facilities.
 - Seeing the same patient consistently for follow-up through process of their care plan.
- ACGME Requirements for Family Medicine Residency Training Programs Include:
 - Inpatient hospital care
 - Pediatrics
 - Musculoskeletal Medicine
 - Obstetrics and Newborns
 - Geriatric Care
 - Surgery
 - Gynecology

Demand for PCPs

- State Population: 37,913,144¹
 - Rural Population: 4,815,309¹
- Total Licensed Physicians: 163,788²
- Primary Care Physicians: 60,253²
- 2:1 Ratio of Specialty Physicians to PCPs
 - The number of primary care physicians has not kept pace with need in the last five years.

1. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2016/>
2. 2019 Medical Board of California Licensee Data

Number of Physicians in California



Source: 2015 and 2017 California Physician Workforce Profile, Association of American Medical Colleges

Importance of Specialty Training for PCPs

- Increase in Demand for Services
 - Homeless and disabled populations
 - Mental health
 - Substance abuse

- Primary Care represented 12.5% of all resident slots filled in the 2019 National Resident Matching Program Main Residency Match.¹

1. <https://www.aafp.org/medical-school-residency/program-directors/nrmp.html>

Discussion Topics

- Physician-Led Teams
- Rural Healthcare
- Primary Care Quality Improvement

Questions?